FORM D

united states
securities and exchange commission 3

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES'
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

'QMB APPROVAL

OMB Number: 3235-0076

Expires:

RECEIVE

Estimated average burden hours per response.....16.00



| Name of Offering (check if this is an amendment and name has changed, and indicate change.) Limited Liability Company interests | 05076224 |
|--|---|
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment | ☐ ULOE |
| A. BASIC IDENTIFICATION DATA | |
| 1. Enter the information requested about the issuer | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | |
| RREEF Global Opportunities Fund II, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Deutsche Investment Management Americas Inc.* | Telephone Number (Including Area Code) 212 454-6405 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) *280 Park Avenue, 40th Floor, New York, New York 10017 | Telephone Number (Including Area Code) |
| Brief Description of Business Investment | PROCESSED |
| Type of Business Organization corporation | lease specify): I HOMSON Hability company ANCIAL |
| Month Year Actual or Estimated Date of Incorporation or Organization: 0 8 0 5 Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) | ated |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five 15) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 8

SEC 1972 (6-02)

| | | | T SBASE DI | ΝΉ | | | | | |
|---|----------------------|--------|-------------------------|----------|--|----------------|---------------------------------------|-------------|---|
| 2. Enter the information re | quested for the fo | llowir | ig: | sammica. | P. Carrier and Constitution of the Con- | ##### <u>#</u> | | | r de de la companya d |
| Each promoter of t | he issuer, if the is | suer h | as been organized wi | ithin | the past five years; | | | | |
| Each beneficial own | ner having the pow | er to | vote or dispose, or dir | ect th | e vote or disposition | of, 10 | % or more of | a clas | s of equity securities of the issuer |
| Each executive offi | icer and director o | f corp | orate issuers and of | corpo | rate general and man | agin | g partners of | partn | ership issuers; and |
| Each general and n | anaging partner o | f part | nership issuers. | | | | | | |
| Check Box(es) that Apply: | ☑ Promoter | | Beneficial Owner | | Executive Officer | \boxtimes | XXXXXX Manager | | General and/or Managing Partner |
| Full Name (Last name first, in | f individual) | | | | · · · · · · · · · · · · · · · · · · · | | Manager | | |
| Deutsche Investment Ma | nagement Amer | icas | Inc. | | | | | | |
| Business or Residence Addres 280 Park Avenue, 40th F | | | | de) | | | | · · · · · · | |
| Check Box(es) that Apply: | Promoter | Ø | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, in | f individual) | | | | | | | | |
| California State Teachers | Retirement Sys | stem | | | | | | | |
| Business or Residence Addres 7667 Folsom Blvd., Sacra | | | - | de) | | | | | |
| Check Box(es) that Apply: | Promoter | Ø | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, it California Public Employe | • | Syst | em | | | | | · · · · · · | |
| Business or Residence Addres | ss (Number and | Street | , City, State, Zip Co | de) | | | | | |
| 400 P. Street, Suite 3492, | Sacramento, C | alifor | nia 95814 | | | | | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, if | f individual) | | <u> </u> | | | 1,000,000 | | | |
| Business or Residence Address | ss (Number and | Street | , City, State, Zip Co. | de) | | - | - | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, if | (individual) | | | | | | <u>-</u> | | |
| Business or Residence Address | ss (Number and | Street | , City, State, Zip Co. | de) | | | · · · · · · · · · · · · · · · · · · · | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, if | findividual) | | | | | <u>-</u> | | | |
| Business or Residence Addres | s (Number and | Street | , City, State, Zip Co. | de) | e de la composition della comp | | | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, if | individual) | | | | | | | | |
| Business or Residence Addres | s (Number and | Street | , City, State, Zip Coo | de) | | | -, -, | | |
| | (Use blan | ık she | et, or copy and use a | dditi | onal copies of this sh | eet, a | is necessary) | | |

| | | | | | | si (ejr) yi yi | iox are | OFFICE | | | | | |
|------|---|---|---|--|--|---|--|---|---|-----------------------------|---|---------------------------------------|---------------------------------------|
| 1. | Has the | issuer sold | i, or does th | ne issuer i | ntend to se | ll, to non-e | accredited : | investors is | n this offer | ine? | | Yes | No ⊠ |
| | | | | | | | | | under ULC | _ | | . 17-7 | EDF |
| 2. | What is | the minim | um investm | | | | | _ | | | ••••• | . s <u>1,0</u> | 00,000.00 |
| 3. | Does th | e offering | permit joint | t ownershi | p of a sing | le unit? | | , | -+-> | | *************************************** | Yes . ⊠ | No |
| 4. | B. Does the offering permit joint ownership of a single unit? | | | | | | | | | | irectly, an | | _ |
| | If a pers or states | sion or sim on to be lis s, list the na | ilar remuner ted is an ass ame of the b you may so | ration for s sociated pe roker or de | solicitation erson or age caler. If me | of purchas ent of a brol ore than fiv | ers in conn ker or dealc e (5) perso | ection with or registered as to be list | sales of se d with the S ted are asso | curities in t SEC and/or | he offering with a stat | ζ. c | |
| | | | first, if indi Services, in | | | | | | | | | | |
| _ | | | Address (N | | 1 Street Ci | ity State 7 | 7in Code) | | | | | *** | |
| | | | Floor, Nev | | | | Lip Code) | | | | | | |
| _ | | | oker or Dea | | | | | | | | | | · · · · · · · · · · · · · · · · · · · |
| _ | | | | | | | | | | | | | |
| Sta | tes in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| | (Check | "All States | or check | individual | States) | •••••• | ••••• | | | | | . ☑ Al | 1 States |
| | AL | AK | AZ | AR | CA | CO | CT | DE | DC | FL | GA | HI | [ID] |
| | TL. | N | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT | NE | NV | NH | NI | NM | NY | NC | ND | OH | OK | OR | PA |
| | RI | SC | SD | TN | TX | UT | VT | VA | WA | WV | WI | WY | PR |
| Ful | l Name (1 | Last name | first, if indi | vidual) | | | | <u> </u> | | | | | |
| Buc | iness or | Residence | Address (N | Jumber an | d Street C | ity State | 7in Code) | | | | | | |
| Dus | 111033 01 | residence | Audices (i | vanioei an | u Succe, C | ny, state, | zip couc) | | | | | | |
| Nar | ne of Ass | ociated Br | oker or Dea | aler | | - | | | | | | | |
| Stat | tes in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit | Purchasers | | *********** | | | | |
| | (Check | "All States | " or check i | individual | States) | ••••• | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | ***************** | **************** | | ☐ Al | I States |
| | AL | AK | AZ | AR | CA | CO | CT | DE | DC | FL | GA | HI | [QI] |
| | IL | ΙN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT | NE | NV | NH | NJ | NM | NY | NC | ND | OH | OK | OR | PA |
| | RI | SC | SD | TN | TX | UT | VT | VA | WA | WV | WI | WY | PR |
| Ful | l Name (I | Last name | first, if indi | vidual) | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Bus | iness or | Residence | Address (N | lumber an | d Street, C | ity, State, 2 | Zip Code) | | | | | | |
| | | | | | | | | | | | | | |
| Nar | ne of Ass | ociated Br | oker or Dea | ıler | | | | | | | | | |
| Stat | es in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| | (Check ' | "All States | " or check i | individual | States) | •••••• | **************** | | ****** | ••••• | | ☐ All | l States |
| | AL | AK | AZ | AR | CA | CO | CT | DE | DC | FL | GA | HI | ID |
| | IL | IN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT | NE | NV | NH | NJ | NM | NY | NC | ND | OH | OK | OR | PA |
| | RI | SC | SD | TN | TX | UT | VT | VA | WA | \overline{WV} | WI | $\overline{\mathbf{W}}\mathbf{Y}$ | PR |

| | 1 | | | |
|----|--|-----------------------------|----------|-------------------------------|
| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | | |
| | Type of Security | Aggregate Offering Price | | Amount Already Sold |
| | Debt | S | | \$ |
| | Equity | | | |
| | Common Preferred | | | |
| | Convertible Securities (including warrants) | 5 | | \$ |
| | Partnership Interests | S | | \$ |
| | Other (Specify LLC Interests | | | |
| | Total | | | |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | | Aggregate |
| | | Number Investors | | Dollar Amount of Purchases |
| | Accredited Investors | 3 | | \$_554,938,957.00 |
| | Non-accredited Investors | | | \$ |
| | Total (for filings under Rule 504 only) | | | \$ |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C.— Question 1. | | | |
| | | Type of | | Dollar Amount |
| | Type of Offering | Security | | Sold |
| | Rule 505 | | _ | S |
| | Regulation A | | _ | \$ |
| | Rule 504 | | | \$ |
| | Total | | _ | \$_0.00 |
| \$ | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | | |
| | Transfer Agent's Fees | ************** | | \$ |
| | Printing and Engraving Costs | .,, | | \$ 7,443.00 |
| | Legal Fees | | 7 | \$ 918,968.00 |
| | Accounting Fees | | <u> </u> | \$ 35,659.00 |
| | Engineering Fees | | \Box | S |
| | Sales Commissions (specify finders' fees separately) | | | \$ |
| | Other Expenses (identify) | | \Box | \$ |
| | | | _ | a 962 070 00 |

| | The state of the s | BIROT INVASCORS EXPENSES AND INCL | PROGRAMS | | |
|------|--|---|--|-----------------------|--|
| | b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer." | | oss | \$553,976,887.00 | |
| 5. | Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for archeck the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par | ny purpose is not known, furnish an estimate a f the payments listed must equal the adjusted gro | nd | | |
| | | | Payments to Officers, Directors, & Affiliates | Payments to Others | |
| | Salaries and fees | | 🗆 \$ | \$ | |
| | Purchase of real estate | | 🛮 \$ | \$ | |
| | Purchase, rental or leasing and installation of made and equipment | | 🗆 \$ | | |
| | Construction or leasing of plant buildings and fac | ilities | 🗆 S | _ 🗆 \$ | |
| | Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger) | ets or securities of another | □ \$ | | |
| | Repayment of indebtedness | | _ | _ | |
| | Working capital | | | 549,276,886.0 | |
| | Other (specify): Reimbursement of Deutsche B | ank AG or its affiliates for costs incurred prior | \$ 4,700,000 | oc | |
| | to December 15, 2005 in connection with the ev | | _ | | |
| | potential investments by the Fund. | | 🔲 \$ | | |
| | Column Totals | umn Totals \$ 4,700,000. | | | |
| | Total Payments Listed (column totals added) | <u>\$ 553,976,886.00</u> | | | |
| | | Dinederan siekantike | | | |
| sigi | issuer has duly caused this notice to be signed by the lature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc | mish to the U.S. Securities and Exchange Comm | nission, upon writte | | |
| Issu | er (Print or Type) | Signature | Date | ଚ | |
| RF | EEF Global Opportunities Fund II, LLC | | December 2 | ⁸ , 2005 | |
| Nar | ne of Signer (Print or Type) | Title of Signer (Print or Type) | | | |
| Plea | se see attached signature page | | | | |

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

RREEF Global Opportunities Fund II, LLC
By: Deutsche Investment Management Americas Inc., its Manager